

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Methods and Devices for Improving Ultrasonic Measurements
Using Multiple Angle Interrogation**

the specification of which:

is attached hereto and identified as Attorney Docket No. Angle.app.us.

I hereby state that I reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) (Country) (Number) (Day/Month/Year Filed) Priority Claimed

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States Application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

<u>Application Serial No.</u>	<u>Filing Date</u>	<u>Status Pending</u>
Methods and Devices for Improving Ultrasonic Measurements Using Anatomical Landmarks and Soft Tissue Correction	March 9, 1998	pending

09071954-0502090

I hereby appoint as my attorneys and agents with full power of substitution and revocation to prosecute my above-identified application for Letters Patent and transact all business in the Patent Office connected therewith:

John D. Mendlein Registration Number 38,770.

I further direct that correspondence concerning this application be directed to:

John D. Mendlein, Ph.D.
680 Neptune Avenue
Encinitas, CA 92024

(760)-634-3969

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity the application or any patent issued thereon.

Full name of first inventor: John D. Mendlein

Inventor's signature _____

Date: 5/1/98

Residence: Encinitas, California, USA

Citizen: USA

Post Office Address: 680 Neptune Avenue
Encinitas, CA 92024

Full name of second inventor: Philipp Lang

Inventor's signature _____

Date: 5/2/98

Residence: San Francisco, California, USA

Citizen: Germany

Post Office Address: 225 Lincoln Way # 206
San Francisco, CA 94122


Please type a plus sign (+) inside this box → +

PTO/SB/81 (10-00)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	09/071,854
	Filing Date	5/2/1998
	First Named Inventor	Mendlein
	Group Art Unit	3737
	Examiner Name	Jaworksi
	Attorney Docket Number	Angle.app us

I hereby appoint:

☒ Practitioners at Customer Number 23483

 Place Customer Number Label here
PATENT TRADEMARK OFFICE

 OR
☐ Practitioner(s) named below:

Name	Registration Number
	23483
PATENT TRADEMARK OFFICE	

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

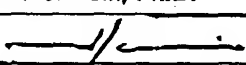
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	John Mendlein, Ph.D.
Signature	
Date	JUNE 27 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/071,854
Filing Date	05/02/98
First Named Inventor	Mendlein
Group Art Unit	3737
Examiner Name	Jaworski, F.
Attorney Docket Number	Angle.App.US (112959-120)

I hereby appoint:

☒ Practitioners at Customer Number

23483



☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

January 31, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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